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MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA
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Dated: Aug 23, 2005

Signature: Robert B. Cohen
(Robert B. Cohen)

Docket No.: SONYJP 3.3-380
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Kita et al.

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Application No: 10/520,449

: Group Art Unit: N/A

Filing Date: January 6, 2005

: Examiner: Not Yet
Assigned

For: PROGRAM RECORDING APPARATUS AND
PROGRAM RECORDING METHOD

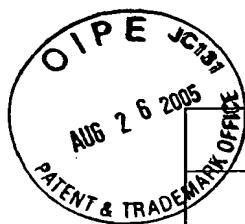
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MS AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Preliminary to the initiation of prosecution of the above-identified pending U.S. patent application, the following amendments and remarks are respectfully submitted.



JC06 Rec'd PCT/PTO 26 AUG 2005 PCT

AMENDMENT TRANSMITTAL LETTER				Docket No. SONYJP 3.3-380
Application No. 10/520,449	Filing Date January 6, 2005	Examiner Not Yet Assigned	Art Unit N/A	
Applicant(s): Yukinori Kita, Shinichiro Sugai, Makoto Korehisa, and Takayuki Miyama				
Invention: PROGRAM RECORDING APPARATUS AND PROGRAM RECORDING METHOD				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	20	- 20 =		x
Independent Claims	2	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				
0.00				
<input checked="" type="checkbox"/> Large Entity	<input type="checkbox"/> Small Entity			
<input checked="" type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-1095</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
Dated: <u>August 23, 2005</u>				
Robert B. Cohen Attorney Reg. No.: 32,768				
LERNER, DAVID, LITTBENBERG, KRUMHOLZ & MENTLIK, LLP 600 South Avenue West Westfield, New Jersey 07090 (908) 518-6316				
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Dated: August 23, 2005		Signature: <u>Robert B. Cohen</u> (Robert B. Cohen)		